

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

10991305-1

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE | | | OTHER THAN OR SMALL ENTITY | | |
|--|--|---|---|-------------------------------|----------------------|------------------------------|----------|-------------------|------------------------|------|-------------------------------|------------------------|--|
| TOTAL CLAIMS | | | 30 | | (Column 2) | | 1 | | | OR | | | |
| | | | | | | | | RATE | FEE | | RATE | FEE | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | | BASIC FEE | 355.00 | OR | BASIC FEE | 710.00 | |
| TOTAL CHARGEABLE CLAIMS | | | 30 minus 20= | | . 10 | | | X\$ 9= | | OR | X\$18= | 180 | |
| INDEPENDENT CLAIMS | | | 6 minus 3 = | | 3 | | | X40= | | OR | X80= | 940 | |
| MU | LTIPLE DEPEN | DENT CLAIM PI | RESENT | | | | | +135= | | OR | +270= | 10 | |
| * If the difference in column 1 is less than zero, enter "0" in co | | | | | | column 2 | | TOTAL | | OR | TOTAL | 1131 | |
| CLAIMS AS AMENDED - PART II | | | | | | | | | <u></u> | | OTHER | | |
| (Column 1) | | | | (Colur | | (Column 3) SMALI | | | ENTITY | OR | SMALL | ENTITY | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | | |
| | Independent | * | Minus | *** | | = | | X40= | | OR | X80= | | |
| L | FIRST PRESE | NTATION OF MI | JUITPLE DEF | PENDEN | CLAIM | and your party of the second | | +135= | | OR | +270= | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | TOTAL | | OR | TOTAL | | |
| | | | | | | | | ADDIT. FEE | <u></u> | JOIN | ADDIT. FEE | | |
| | | (Column 1) CLAIMS | | HIGH | IEST | (Column 3) | Г | 1 | ADDI- | 1 | | ADDI- | |
| AMENDMENT B | | REMAINING AFTER AMENDMENT | Lamanaga a companya a | NUM PREVIO PAID | DUSLY | PRESENT EXTRA | | RATE | TIONAL FEE | | RATE | TIONAL FEE | |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | | |
| | Independent | | Minus | *** | | = | ı | X40= | | OR | X80= | | |
| <u> </u> | FIRST PRESE | NTATION OF MU | JLTIPLE DEF | ENDEN | CLAIM | | | +135= | | OR | +270= | .• | |
| TO | | | | | | | | | | OR | TOTAL | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | ADDIT. FEE | | | ADDIT. FEE | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO | IEST BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL | | RATE | ADDI- TIONAL | |
| | Total | * | Minus | ** | ron | = | | X\$ 9= | FEE | | X\$18= | FEE | |
| | Independent | * | Minus | *** | _ | = | - | | | OR | | | |
| Ā | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAI | | | | | | | X40= | | OR | X80= | | |
| | | | | | | | | | | OR | +270= | | |
| ** | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |